2018 Current Fiscal Year Report: Advisory Committee on Breast Cancer in Young Women

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1. Department or Agency 2. Fiscal Year

Department of Health and Human Services 2018

3. Committee or Subcommittee 3b. GSA Committee No.

Advisory Committee on Breast Cancer in Young Women 73636

4. Is this New During Fiscal 5. Current 6. Expected Renewal 7. Expected Term

Year? Charter Date Date

No 06/17/2018 06/17/2020

8a. Was Terminated During 8b. Specific Termination 8c. Actual Term

FiscalYear? Authority Date

No

9. Agency Recommendation for Next10a. Legislation Reg to 10b. Legislation

FiscalYear Terminate? Pending?

Continue Not Applicable Not Applicable

11. Establishment Authority Statutory (Congress Created)

13. Effective 14. Committee 14c.

12. Specific Establishment Authority

Date

Type

Presidential?

Section 399NN of the of the Public Health

03/23/2010 Continuing No

Service Act

15. Description of Committee Other Committee

16a. Total Number of No Reports for this

Reports FiscalYear

17a. Open 0 17b. Closed 0 17c. Partially Closed 0 Other Activities 0 17d. Total 0

Meetings and Dates

No Meetings

	Current FY	Next FY
18a(1). Personnel Pmts to Non-Federal Members	\$0.00	\$11,250.00
18a(2). Personnel Pmts to Federal Members	\$0.00	\$0.00
18a(3). Personnel Pmts to Federal Staff	\$54,290.00	\$55,322.00
18a(4). Personnel Pmts to Non-Member Consultants	\$0.00	\$0.00
18b(1). Travel and Per Diem to Non-Federal Members	\$0.00	\$18,031.00
18b(2). Travel and Per Diem to Federal Members	\$0.00	\$0.00
18b(3). Travel and Per Diem to Federal Staff	\$0.00	\$0.00
18b(4). Travel and Per Diem to Non-member Consultants	\$0.00	\$0.00
18c. Other(rents, user charges, graphics, printing, mail, etc.)	\$30.00	\$6,350.00

19. Federal Staff Support Years (FTE)

20a. How does the Committee accomplish its purpose?

The committee is authorized to recommend evidence-based initiatives for the purposes of advancing understanding and awareness of breast cancer among young women (particularly those at heightened risk for developing breast cancer); to establish and conduct public and health care professional education activities; to conduct prevention research; and to support the dissemination of evidence-based age appropriate messages and materials.

20b. How does the Committee balance its membership?

Membership includes expertise in the fields of breast cancer, prevention, early detection, diagnosis, public health, social marketing, genetic testing and counseling, treatment, rehabilitation, palliative care, and survivorship or in related disciplines with a specific focus on young women. The committee also includes ex-officio representatives from the National Cancer Institute; Department of Defense; Indian Health Service; Agency for Healthcare Research and Quality; Health Resources and Services Administration; and the US Department of Health and Human Services, Office of Womens Health. The committee has twelve females and seven ethnic/racial minority representatives.

20c. How frequent and relevant are the Committee Meetings?

Meetings are held one to two times per year, which are relevant to items outlined in the committee's charter. This includes establishing and conducting public and health care professional education activities, conducting prevention research, and supporting the dissemination of evidence-based age appropriate messages and materials. However, if the need arises, the committee will convene a meeting to meet the needs of the committee/agency.

20d. Why can't the advice or information this committee provides be obtained elsewhere?

The Advisory Committee on Breast Cancer in Young Women shall provide advice and guidance to the Secretary, HHS, the Assistant Secretary for Health, and the Director, CDC, regarding the formative research, development, implementation and evaluation of evidence-based activities designed to prevent breast cancer and promote the early detection and support of young women who develop the disease. The advice provided by the Committee will assist in ensuring scientific quality, timeliness, utility, and dissemination of credible appropriate messages and resource materials.

20e. Why is it necessary to close and/or partially closed committee meetings? $\ensuremath{\text{N/A}}$

21. Remarks

Reports not required for this committee. However, recommendations were forwarded to the Secretary (via letter) of HHS in FY15.

Designated Federal Officer

Fairley Health Scientist

Committee Members	Start	End	Occupation	Member Designation
Avner, Lindsay	01/18/2017	11/30/2020	Founder and Chairman of the Board	Special Government Employee (SGE) Member
Bergman, Kendall	02/21/2017	08/01/2018	Managing Driector, Mission Operations	Representative Member
Bright, Cedric	09/22/2015	05/13/2018	Assistant Dean Admissions, UNC School of Medicine	Special Government Employee (SGE) Member
Brown, Susan Chambers, Shonta			Managing Director, Community Health Executive Vice President, Health Equity	Representative Member Representative Member
Colditz, Graham	09/15/2015	04/16/2018	Niess-Gain Professor of Surgery, Washington University	Special Government Employee (SGE) Member
Davidson, Ellyn	01/18/2017	11/30/2020	President, Brogran & Brogan	Special Government Employee (SGE) Member
Dhage, Shubhada	01/20/2017	11/30/2020	Associate Director of Diversity in Cancer Research	Special Government Employee (SGE) Member
Dizon, Don	09/22/2015	11/30/2018	Director, Oncology Sexual Health Clinic, Massachusette General Hospital	sSpecial Government Employee (SGE) Member
Friedman, Susan	01/18/2017	11/30/2021	Executive Director	Representative Member
Hanson, Arin	03/22/2013	11/30/2020	Manager, Young Women's Initiative	Representative Member
Huang, Chien-Chi	09/14/2015	04/19/2018	Founder & Executive Director, Asian Women for Health	Special Government Employee (SGE) Member
Jeudy, Myrlene	02/28/2017	11/30/2021	Assistant Professor in Obsetrics and Gynecology	Representative Member
Karmo, Maimah	03/22/2013	11/30/2020	Chief Executive Officer	Representative Member
King, Tari	09/30/2015	11/30/2018	Chief, Breast Surgery, Dana Farber/Brigham and Women's Cancer Center	Special Government Employee (SGE) Member
Lachance, Christina	a 03/15/2016	11/30/2020	Senior Advisor, HRSA Office of Women's Health	Ex Officio Member
Lee, Jung-Min	04/25/2014	11/30/2020	Assistanct Clinical Investigator, National Institutes of Health	Ex Officio Member
Lythcott, Ngina	11/30/2010	11/30/2020	Consultant	Representative Member
Mayo, Rachel	04/17/2018	11/30/2021	Professor, Clemson University	Special Government Employee (SGE) Member
McWilliams, Shawntell	05/17/2015	05/03/2018	Director of National Programs and Strategic Partnetships	Representative Member
Meneses, Karen	09/22/2015	08/01/2018	Professor & Associate Dean, University of Alabama at Birmingham School of Nursing	Special Government Employee (SGE) Member
Merschdorf, Jennifer	07/25/2013	11/30/2020	Chief Executive Officer	Representative Member
Roth, Jacquelyn	09/30/2015	11/30/2018	Molecular Development Assistant Director, The Hospital of the University of Philadelphia	alSpecial Government Employee (SGE) Member
Sanft, Tara	01/23/2017	11/30/2020	Assistant Professor of Medicine	Special Government Employee (SGE) Member
Saphier, Nicole	05/14/2018	11/30/2019	Director of Breast Imaging, Memorial Sloan-Kettering, Monmouth	Special Government Employee (SGE) Member Special Government
Silber, Elana	01/17/2017	11/30/2020	Executive Director	Employee (SGE) Member

Sullivent, Ernest	01/25/2017 04/25/2	018 Medical Officer, Commissioned Corp	Ex Officio Member
Tannenbaum	04/20/2018 11/30/2	Director, Cancer Genetic Counseling Program,	Special Government
Turner, Joyce	04/20/2016 11/30/2	Children's National Medical Center	Employee (SGE) Member
Toedt, Michael	05/25/2018 11/30/2	022 Chief Medical Officer, Indian Health Service	Ex Officio Member
Tuttle. Debbie	09/14/2015 11/30/2	Breast Oncology Nurse Practitioner, California	Special Government
Tuttle, Debble 09/14/2015	09/14/2015 11/30/2	Oncology of the Central Valley	Employee (SGE) Member
Vaday, Gayle	09/20/2011 11/30/2	Program Manager, Congressional Directed Medical	Ex Officio Member
vaday, Gayle 09/20/20	09/20/2011 11/30/2	Research Programs	Ex Officio Member
Walker, Desiree 09/23/20	09/23/2015 11/30/2	Survivor	Special Government
	09/23/2013 11/30/2	JIO Sulvivoi	Employee (SGE) Member
Weiss, Marisa	09/22/2015 11/30/2018	8 President & Founder, Breastcancer.org	Special Government
			Employee (SGE) Member

Number of Committee Members Listed: 33

Narrative Description

N/A

The Advisory Committee on Breast Cancer in Young Women provides advice and guidance to the Secretary, HHS, the Assistant Secretary for Health, and the Director, CDC, regarding the formative research, development, implementation and evaluation of evidence-based activities designed to prevent breast cancer (particularly among those at heightened risk) and promote the early detection and support of young women who develop the disease. The advice provided by the Committee will assist in ensuring scientific quality, timeliness, utility, and dissemination of credible appropriate messages and resource materials.

What are the most significant program outcomes associated with this committee?

	Checked if Applies
Improvements to health or safety	✓
Trust in government	
Major policy changes	
Advance in scientific research	✓
Effective grant making	
Improved service delivery	
Increased customer satisfaction	
Implementation of laws or regulatory requirements	
Other	
Outcome Comments	

What are the cost savings associated with this committee?

Checked if Applies

None ✓

Unable to Determine	
Under \$100,000	
\$100,000 - \$500,000	
\$500,001 - \$1,000,000	
\$1,000,001 - \$5,000,000	
\$5,000,001 - \$10,000,000	
Over \$10,000,000	
Cost Savings Other	

Cost Savings Comments

Not Applicable

What is the approximate <u>Number</u> of recommendations produced by this committee for the life of the committee?

12

Number of Recommendations Comments

The committee did not put forth any formal recommendations in FY18. There were 9 formal recommendations in FY15 and 3 formal recommendations in FY14 for a total of 12 recommendations for the life of the committee.

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Fully</u> implemented by the agency?

50%

% of Recommendations Fully Implemented Comments

6 of 12 recommendations have been fully implemented. They include FY15 Recommendations #1-4 and FY14 Recommendations 1 & 3. FY17: CDC has implemented the following efforts with regard to recommendations 6 & 8: Doc Styles Survey: CDC implemented a survey about early onset breast cancer and provider behavior on the Doc Styles survey. Data collection was completed in June 2017 and analysis is underway; Bring Your Brave formative research: CDC implemented multiple rounds of formative research to engage with Heath Care Providers (HCPs) regarding their breast cancer education needs and resources; findings resulted in the development of a CME and various digital resources and web pages; Know:BRCA evaluation: engaged HCPs in qualitative research efforts to learn more about their needs and utilization of resources related to hereditary breast and ovarian cancer (HBOC). CDC continues to expound upon the Bring Your Brave Campaign, a large social/digital media campaign launched in 2015 to provide information about breast cancer to women younger than age

45. The campaign tells real stories about young women whose lives have been affected by breast cancer. These stories about prevention, risk, family history and survivorship bring to life the idea that young women can be personally affected by breast cancer. Through these testimonials, Bring Your Brave aims to inspire young women to learn their risk for breast cancer, talk with their health care provider about their risk, and live a breast healthy lifestyle. Additional continued activities include funding grantees to support young breast cancer survivors and increase knowledge about breast cancer genetics and the use of the Know:BRCA clinical decision support tool.

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Partially</u> implemented by the agency?

25%

% of Recommendations Partially Implemented Comments

4 of the total 12 recommendations have been partially implemented. 4 of the 6 remaining recommendations are currently being addressed and the remaining 2 recommendations have not been considered at this time due to feasibility of proposed effort and funding availability. FY18: Breast Health Education Evaluation: CDC funded a contract to evaluate existing programs which educate HCPs about HBOC and early onset breast cancer. The project began in October 2017 and continued into FY18. The following work is ongoing as a whole. FY14 Recommendation 2, FY15 Recommendations 6, 8, and 9 Patient & Provider communication: CDC funded an effort to identify important health messages and resources needed to facilitate patient/provider dialogue regarding early breast cancer. The project will be completed by the end of FY18 and deployed to the public in FY19. The Educating Medical Providers about Breast Cancer in Young Women: Breast Cancer Risk Factors, Survivorship, and Breast Health contract awarded in FY15 released a Continuing Medical Education (CME) Module in FY17 to address FY15 Recommendations 6,8,9 and the remaining component of FY 14 Recommendation 3, however work to address the recommendations will continue in various other forms. A new Bring Your Brave campaign has been funded in FY18 which will focus primarily on Health Care Provider education and communication with young women. In FY18 a project to develop additional video based training resources for Health Care Providers was funded through the CDC Office of State, Tribal, Local, and Territorial Support (OSTLTS). This project should be completed by FY19. FY15 Recommendation 5 is supported in part through various DCPC research projects (i.e. genomics, alcohol, etc.) FY 15 Recommendation 7 may be considered in the future. The Know: BRCA (formerly BodyTalk) clinical decision support tool was launched in 2014 to address issues of hereditary breast cancer among young women. The resource includes content that encourages health care providers and young women to engage in dialogue about breast cancer risk. The resource was evaluated and completed in FY18 for

efficacy and utilization. As a result of the evaluation Know:BRC address issues identified in the evaluation. This effort also inclued address for health care providers in response to components 2.	ides outreach and
Does the agency provide the committee with feedback regarding implement recommendations or advice offered? Yes ✓ No ◯ Not Applicable ◯	arding actions taken to
Agency Feedback Comments	
CDC provides feedback to the Committee during formal public	meetings.
What other actions has the agency taken as a result of the recommendation?	committee's advice or
	Checked if Applies
Reorganized Priorities Reallocated resources Issued new regulation Proposed legislation Approved grants or other payments Other	
Action Comments CDC launched and completed formative research regarding the campaign targeting young women and health care providers at cancer and general breast health among young women. The puwas also launched in May 2015 and is ongoing. Information care www.cdc.gov/bringyourbrave.	oout early onset breast ublic education campaign
Is the Committee engaged in the review of applications for No	grants?
Grant Review Comments N/A	
How is access provided to the information for the Committ	ee's documentation?
	Checked if Applies
Contact DFO	
Online Agency Web Site	✓

Online Committee Web Site	✓
Online GSA FACA Web Site	✓
Publications	
Other	

Access Comments

N/A